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Form 990-PF

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Information about Form 990-PF and its separate instructions is at www.lrs.gov/form990pf. DEC 31, For calendar year 2016 or tax year beginning MAY 12. 2016 , and ending 2016 Name of foundation A Employer identification number THE KELLY FAMILY FOUNDATION INC 81-2662041 Number and street for P.O. box number if mail is not delivered to street address! Room/suite B Telephone number 300 FLINTLOCK ROAD 347-371-3650 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here SOUTHPORT, CT 06890 G Check all that apply: X Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return بتر Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation X Address change Name change Section 501(c)(3) exempt private foundation H Check type of organization; E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method. | X | Cash Accruat If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 179,302. (Part I, column (d) must be on cash basis.) ▶\$' Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books ıncome income 200,096 N/A Contributions, gifts, grants, etc., received Check If the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 1,765. 1,765 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) <7,571. STATEMENT 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 128,549. 95,869 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns b Less Cost of goods sold c Gross profit or (loss) 11 Other income 12 Total, Add lines 1 through 11 194. 290 97.634 0. 0 0 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 5,000 0 16a Legal fees STMT 3 **b** Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 4 324 100 23 Other expenses 24 Total operating and administrative 5,324 expenses. Add lines 13 through 23 100 6,800 6,800. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 12,124 6,800. Add lines 24 and 25 100 27 Subtract line 26 from line 12: 182,166 à Excess of revenue over expenses and disbursements 97,534 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-) Form 990-PF (2016)

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions.

7

Form 990-PF (2016)

7 Add lines 5 and 6

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

	m 990-PF (2016) THE K	ELLY FAMILY	FOUNDATION IN Income (Section 4944	IC (a) 4940(h) 4940(e) or 4	81-	2662	041	ction	Page 4
	Exempt operating foundations desc					1010	300 11	1511 0		
Id							ł			
h	Date of ruling or determination lette Domestic foundations that meet the					1			1,9	51
	of Part I, line 27b	; Section 4940(e) requireme	sints in rait v, check note	and cit	let 1 \(\range{0} \)	 '-			<u> </u>	<u> </u>
	C All other domestic foundations ente	v 20/ of line 27h. Evernet fr	oroign organizations enter 40/	of Dart L line	12 col (b)					
			•			١,	}			0.
	Tax under section 511 (domestic se Add lines 1 and 2	300001 4947 (a)(1) trusts and	u taxable loundations utily. Of	ileis eiller -u-)	-	3			1,9	
		contrar 40.47/a\/1\ trunto an	d tayahla fayadatiana anki O	there enter O		4	 		1,3	77.
	Subtitle A (income) tax (domestic s			mers enter -u-		5	 		1,9	<u> </u>
	Tax based on investment income.	Subtract line 4 from line 3.	ii zero or iess, enter -u-			- °			1,J	<u> </u>
		2015	4- 0040	10-1						
	a 2016 estimated tax payments and 2	· •	10 20 16	6a		-				
	Exempt foreign organizations - tax v			6b		-	i			
	Tax paid with application for extens	•	68)	6c		-}				
	Backup withholding erroneously with		•	6d [┨				^
	Total credits and payments. Add lin	=				7				0.
				ched		8				<u>43.</u>
	Tax due. If the total of lines 5 and 8			•	.	9	_		1,9	94.
	Overpayment. If line 7 is more than		=			10				
	Enter the amount of line 10 to be: C				Refunded -	11				
_	art VII-A Statements Re	- 		 					N 1	<u> </u>
1a	a During the tax year, did the foundat	ion attempt to influence any	y national, state, or local legis	lation or did it p	participate or intervene	e in			Yes	No
	any political campaign?							1a		<u>X</u>
b	Did it spend more than \$100 during			· ·		-		16		<u> </u>
	If the answer is "Yes" to 1a or 1		· ·	nd copies of a	any matenals publis	hed or		1		
	distributed by the foundation in	connection with the act	tivities.							
¢	Did the foundation file Form 1120-F	OL for this year?						1c		<u>X</u>
d	t Enter the amount (if any) of tax on p				_					
	(1) On the foundation. ▶ \$				0.	_				
е	e Enter the reimbursement (if any) pa	-	the year for political expendi	ture tax imposi	ed on foundation				}	
	managers. > \$	0.								
2	Has the foundation engaged in any	activities that have not prev	riously been reported to the IF	१९७				2		<u> </u>
	If "Yes," attach a detailed descr	nption of the activities.								
3	Has the foundation made any chang	ges, not previously reported	to the IRS, in its governing i	nstrument, artı	cles of incorporation,	or				
	bylaws, or other similar instruments	s? If "Yes," attach a conf	formed copy of the change	es				_3		<u>X</u>
	a Did the foundation have unrelated b		1,000 or more during the yea	rγ	•			4a_		<u>X</u>
b	f "Yes," has it filed a tax return on F	orm 990-T for this year?				N	I/A	4b_		
5	Was there a liquidation, termination	ı, dıssolution, or substantial	l contraction during the year?					5		<u>X</u>
	If "Yes," attach the statement re	equired by General Instri	uction T.							
6	Are the requirements of section 508	3(e) (relating to sections 49	41 through 4945) satisfied ei	ther:					1	
	 By language in the governing inst 	•							.	
	 By state legislation that effectively 	, amends the governing ins	trument so that no mandator	y directions tha	it conflict with the stat	e law				
	remain in the governing instrument							6	X	
7	Did the foundation have at least \$5,	,000 in assets at any time d	uring the year? If "Yes," con	nplete Part II,	col. (c), and Part X	/		7_	X	
8a	a Enter the states to which the founda	ation reports or with which	it is registered (see instructio	ns) 🕨	 _					1
	NJ,CT									
b	b If the answer is "Yes" to line 7, has t	the foundation furnished a c	copy of Form 990-PF to the A	ttorney Genera	l (or designate)					
	of each state as required by General	al Instruction G? If "No,"	attach explanation					8b	Х	
9	is the foundation claiming status as	a private operating founda	tion within the meaning of se	ction 4942(j)(3) or 4942(j)(5) for cal	endar				
	year 2016 or the taxable year begin	ning in 2016 (see instruction	ons for Part XIV)? If "Yes," c	omplete Part	XIV .			9		<u>X</u>
10	Did any nercons herome substantia	al contributors during the ta	N 110257 11 511-1 5 -11-1	la katian than an-	9	יי אייי	י קי	10	Y	

Х

3b

Yes X No

during the year?

b If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2016.)

had not been removed from jeopardy before the first day of the tax year beginning in 2016?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

orm 990-PF (2016) THE KELLY FAMILY FOUNDA			81-26620	41 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (sect			es X No	
(2) Influence the outcome of any specific public election (see section 4955)	; or to carry on, directly or indir			
any voter registration drive?			es X No	
(3) Provide a grant to an individual for travel, study, or other similar purpos		. L Ye	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	tion described in section			
4945(d)(4)(A)? (see instructions)	•••	Ye	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literal	ry, or educational purposes, or			
the prevention of cruelty to children or animals?	***	Ye	es X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify to	inder the exceptions described	ın Regulatıons		
section 53.4945 or in a current notice regarding disaster assistance (see inst	tructions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check	c here			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it mainta	ined		
expenditure responsibility for the grant?	Ŋ	1/A 🔲 Ye	es 🔲 No	
If "Yes," attach the statement required by Regulations section 53.49	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, t				
a personal benefit contract?			es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	nersonal henefit contract?			6b X
If "Yes" to 6b, file Form 8870	x porsonal benefit contract.			1 11
7a At any time during the tax year, was the foundation a party to a prohibited tax	v chalter transaction?		es X No	
				7b
b If "Yes," did the foundation receive any proceeds or have any net income attr Part VIII Information About Officers, Directors, Trus		nogoro Highly		70
Paid Employees, and Contractors	stees, roungation wa	mayers, nigni	y	
List all officers, directors, trustees, foundation managers and the	ir compensation			
		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	account, other
	to position	enter -0-)	compensation	allowances
JOHN F KELLY	_PRESIDENT			
300 FLINTLOCK ROAD	1 00) (•
SOUTHPORT , CT 06890	1.00	0.	0.	0.
ELIZABETH L KELLY	_DIRECTOR			
300 FLINTLOCK ROAD	⊣			_
SOUTHPORT , CT 06890	1.00	0.	0.	0.
CHRISTOPHER J KELLY	_DIRECTOR			
300 FLINTLOCK ROAD	_		į	
SOUTHPORT , CT 06890	1.00	0.	0.	<u> </u>
		<u> </u>		
Compensation of five highest-paid employees (other than those in		enter "NONE."		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address of outly employee paid more than \$60,000	devoted to position	(C) Compensation	and deferred compensation	allowances
NONE				
		1		
	7	1	[
		 		
	7			
	 	 		
	\dashv			
Fahal number of other ampleyees paid over CEO 000		1		0
Total number of other employees paid over \$50,000			· · · · · · · · · · · · · · · · · · ·	990-PF (2016)
			Form	33 0- FF (2016)

Form 990-PF (2016) THE KELLY FAMILY FOUNDATION INC Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ation Managers, Highly	2662041 Page 7
Faid Employees, and Contractors (continued) 3 Five highest-paid independent contractors for professional services. If none, ente	r "NONF "	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(5) 1) pe e l'estitie	(C) Composition
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities	- <u></u>	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the conferenc	stical information such as the duced, etc.	Expenses
1 N/A		
2		
3	-	
		·
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on N/A	lines 1 and 2.	Amount
N/A		
2		
All other program-related investments. See instructions, 3		
T. I. I. Add by a d. Abyrouch O.		
Total. Add lines 1 through 3		0 • Form 990-PF (2016)

	stic foundations must complete this part. Foreign foun		e instructions)
1 Fair market value of assets not used (or held for use) directly in c			
a Average monthly fair market value of securities	, , , , , ,	1a	120,075.
b Average of monthly cash balances		1b	120,075. 127,227.
c Fair market value of all other assets		1c	
d Total (add lines 1a, b, and c)		1d	247,302.
e Reduction claimed for blockage or other factors reported on lines	s 1a and		
1c (attach detailed explanation)	1e 0 .		
2 Acquisition indebtedness applicable to line 1 assets		2	0.
3 Subtract line 2 from line 1d		3	247,302.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3	(for greater amount, see instructions)	4	3,710.
5 Net value of noncharitable-use assets. Subtract line 4 from line	·	5	243,592.
6 Minimum investment return. Enter 5% of line 5 ADJUSTI	·	6	7,808.
Part XI Distributable Amount (see instructions) (S	Section 4942(j)(3) and (j)(5) private operating foundations and t complete this part.)	d certain	
1 Minimum investment return from Part X, line 6		1	7,808.
2a Tax on investment income for 2016 from Part VI, line 5	2a 1,951.		
b Income tax for 2016. (This does not include the tax from Part VI.			
c Add lines 2a and 2b		2c	1,951.
3 Distributable amount before adjustments. Subtract line 2c from li	ne 1 [3	5,857.
4 Recoveries of amounts treated as qualifying distributions		4	0.
5 Add lines 3 and 4		5	5,857.
6 Deduction from distributable amount (see instructions)		6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. En	ter here and on Part XIII, line 1	7	5,857.
Part XII Qualifying Distributions (see instructions			
1 Amounts paid (including administrative expenses) to accomplish	charitable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d),	, line 26	1a	6,800.
b Program-related investments - total from Part IX-B		1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in	carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:			
a Suitability test (prior IRS approval required)		3a	
b Cash distribution test (attach the required schedule)		3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and	F	4	6,800.
5 Foundations that qualify under section 4940(e) for the reduced ra	ate of tax on net investment		
income. Enter 1% of Part I, line 27b		5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4		6	6,800.
Note: The amount on line 6 will be used in Part V, column (b), in	subsequent years when calculating whether the foundation q	ualifies for th	ne section

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
<u> </u>	Corpus	Years prior to 2015	2015	2016
1 Distributable amount for 2016 from Part XI, line 7				5,857.
2 Undistributed income, if any, as of the end of 2016	•			
a Enter amount for 2015 only			0.	
b Total for prior years:				
g rotal for prior years.		0.		
3 Excess distributions carryover, if any, to 2016.	-	· · · · · · · · · · · · · · · · · · ·		
a From 2011				
b From 2012				
c From 2013				
d From 2014				
e From 2015	0			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2016 from				
Part XII, line 4: ► \$ 6,800.			•	
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior		•		•
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	_			
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				5,857.
e Remaining amount distributed out of corpus	943.			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	943.		•	
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.	•	
c Enter the amount of prior years'				
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously		0.		
assessed				
d Subtract line 6c from line 6b. Taxable		0.		
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line			0.	
4a from line 2a. Taxable amount - see instr.			· · · · · · · · · · · · · · · · · · ·	
f Undistributed income for 2016. Subtract				
lines 4d and 5 from line 1. This amount must				0.
be distributed in 2017				
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011	١			
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017.				
Subtract lines 7 and 8 from line 6a	943.			
10 Analysis of line 9:				
a Excess from 2012				
b Excess from 2013				
c Excess from 2014				
d Excess from 2015				
e Excess from 2016 943.			<u> </u>	000 05

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		OUNDATION :			62041 Page 10
Part XIV Private Operating F			I-A, question 9)	<u>N/A</u>	
1 a If the foundation has received a ruling o	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective fo	r 2016, enter the date of	the ruling	▶ ∟		
b Check box to indicate whether the found		ng foundation described		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1	ļ .
income from Part I or the minimum	(a) 2016	(b) 2015	(c) 2014	(d) 2013	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities	,_,				
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon; a "Assets" alternative test - enter;					
(1) Value of all assets		ļ			
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)	<u></u>				
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					Ì
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization			•		
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see inst	ructions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh			tributions received by th	e foundation before the clo	se of any tax
year (but only if they have contributed n	nore than \$5,000). (See :	section 507(d)(2).)			
SEE STATEMENT 8			· <u></u>		
 b List any managers of the foundation wh other entity) of which the foundation has 			(or an equally large port	tion of the ownership of a p	partnership or
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan	. Scholarship, etc., P	rograms:	·	
Check here ► X if the foundation o				not accept unsolicited rea	uests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num	ber or e-mail address of	the person to whom app	lications should be addre	essed:	
b The form in which applications should b	e submitted and informa	ition and materials they s	should include:		
c Any submission deadlines;					
d Any restrictions or limitations on awards	s such as hy nanaranhin	al areas, charitable fields	kinds of institutions of	other factors:	
a with tear territoria of infinitations on awaits	s, such as by goographic	ai ai cas, chantaule nelus	, สภายอ บา การแบบเบกร, บา	other lacture,	
522501 11 22 15					Form 990-DE (2016)

Total

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income		oy section 512, 513, or 514	(e)
g. ees amount amous emer mos maisaisa.	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Bušiness code	Amount	sion	Amount	function income
•	1000				
L	_				.
c	-				
d					
e					
f	-				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	1,765.	
5 Net rental income or (loss) from real estate:				•	
a Debt-financed property		·			
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	<7,571.>	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue.					
a	_				
b					
C					
d	l l	·			
e					
12 Subtotal. Add columns (b), (d), and (e)			0.	<5,806.⊳	. 0
13 Total. Add line 12, columns (b), (d), and (e)				13	<5,806
(See worksheet in line 13 instructions to verify calculations.)				

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).

Form **990-PF** (2016)

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Form 990-PF (2016) THE KELLY FAMILY FOUNDATION INC 81-2662041 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the o	rganization directly or indir	rectly engage in any i	of the followin	g with any other organizati	on described in secti	on 501(c) of		Yes	No
	the Code	(other than section 501(c))(3) organizations) oi	r in section 52	7, relating to political orgai	nizations?				
a		s from the reporting founds	ation to a noncharital	ble exempt or	ganization of:					1
	(1) Cash	1						1a(1)		<u>X</u>
	(2) Othe	r assets						1a(2)		<u>X</u>
b	Other trai	nsactions:								
	(1) Sales	s of assets to a noncharital	ble exempt organizat	ion				1b(1)		<u>X</u>
	(2) Purc	chases of assets from a nor	ncharitable exempt o	rganization			•	1b(2)	<u> </u>	<u>X</u> _
	(3) Rent	al of facilities, equipment,	or other assets				•	1b(3)		<u>X</u>
	(4) Reim	nbursement arrangements					•	1b(4)		_X_
	(5) Loar	ns or loan guarantees						1b(5)	L	<u>X</u>
	(6) Perfe	ormance of services or me	mbership or fundrais	sing solicitatio	ns			1b(6)		<u>X</u> _
C		of facilities, equipment, ma	-			•		1c		<u>X</u>
đ							narket value of the goods, of		ets,	
					ed less than fair market vali	ue in any transaction	or sharing arrangement, sh	ow in		
		d) the value of the goods,				 				
(a) L	ine no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	of transfers, transactions, and si	naring an	rangeme	nts
			<u>.</u>	N/A						
					<u>.</u>					
			<u> </u>							
_										
							 			
						_				
			<u> </u>							
2a		•	-		or more tax-exempt organ	izations described		_		_
		n 501(c) of the Code (other		(3)) or in sect	ion 527?		. "L	_ Yes	X	No
b	If "Yes," c	omplete the following sch								
		(a) Name of org	anization		(b) Type of organization		c) Description of relationsh	<u>p</u>		
		<u> N/A</u>								
-										
						<u> </u>				
						ļ. <u>. </u>				
						<u> </u>				
					g accompanying schedules and 1 taxpayer) is based og all inforr		has any knowledge May	the IRS		
Sig	gn 👢		61	, p. a. (01.101 1.10)	Elistana	Nation of Winer propaga	show	n with th <u>m</u> below	(see ins	er br)?
не	re				13/13/2017	PRESID	ENT	Yes	L	No
	Sig	nature of officer or b ustee			Date	Title				
		Print/Type preparer's na	ıme	Preparer's si	gnature	Date	Check if PTIN			
_]	self- employed			
Pa		MARY HOYT		MARY H	OYT	05/03/17	P00	087	112	
	eparer	Firm's name ► BLU	M, SHAPIR	O & CO	MPANY, P.C.		Firm's EIN ▶ 06-10	092	05	
Us	e Only									
		Firm's address ▶ 2								
		SH	ELTON, CT	06484	-4640		Phone no. 203 94			
							For	rm 99 (0-PF	(2016)

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient GENERAL DONATION ÞС SPECIAL OLYMPICS 2666 STATE STREET STE 1 100. HAMDEN, CT 06517 100. Total from continuation sheets

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, Form 990-EZ, or Form 990-PF.
 Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2016

Name of the organization

Employer identification number

T	HE KELLY FAMILY FOUNDATION INC	81-2662041
Organization type (check		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	is covered by the General Rule or a Special Rule. c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile. See instructions
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling by one contributor. Complete Parts I and II. See instructions for determining a contributor	-
Special Rules		
sections 509(a)(1 any one contribu	on described in section 501(c)(3) filing Form 990 or 990 EZ that met the 33 1/3% support) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990 EZ), Part II, line 13, 16a, tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount Z, line 1 Complete Parts I and II.	or 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from outions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educations of cruelty to children or animals. Complete Parts I, II, and III.	•
year, contributior is checked, enter purpose. Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from as exclusively for religious, charitable, etc., purposes, but no such contributions totaled may here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it tole, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc.,
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Fin Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fit the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

Name of organization

Employer identification number

THE KELLY FAMILY FOUNDATION INC

81-2662041

Part I	Contributors (See instructions). Use duplicate copies of Part I	if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN AND ELIZABETH KELLY 300 FLINTLOCK ROAD SOUTHPORT, CT 06890	\$ 200,096.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
323452 10-1		\$\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

THE KELLY FAMILY FOUNDATION INC

81-2662041

Part II	Noncash Property (See instructions) Use duplicate copies of P	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	5,880 SHARES OF PFIZER INC		
- - -		\$ 200,096.	09/16/16
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- - -		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
-		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
453 10-18-1		\$\$	90, 990-EZ, ar 990-PF) (2

Name of organi	ization			En	nployer identification number
THE KEL	LY FAMILY FOUNDATION	INC			81-2662041
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete of	ributions to organizations desc	ribed in section	1 501(c)(7), (8), or (10	0) that total more than \$1,000 for
	completing Part III, enter the total of exclusively religious	s, charitable, etc., contributions of \$1,	000 or less for the	year (Enterthis into once)	> \$
(a) No	Use duplicate copies of Part III if addition	al space is needed.	·		
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Descrip	tion of how gift is held
Part I					
-					
		(e) Transfer o	f gift		
	-	1.7ID 4	.		
-	Transferee's name, address, ar	<u>10 ZIP + 4</u>	Hei	lationship of transi	reror to transferee
-					****
_					
				<u> </u>	
(a) No. from	(b) Purpose of gift	(c) Use of gift		(d) Descrip	tion of how gift is held
Part I					
-					
		(e) Transfer o	f gift		
	Tuesdanesia versa eddinesia es	-4 7ID . 4	Del	lationahin of turnor	favor to transfero
-	Transferee's name, address, ar	10 ZIP + 4		lationship of transf	refor to transferee
-					
-					
(a) No.					
from	(b) Purpose of gift	(c) Use of gift		(d) Descrip	tion of how gift is held
Part I					·
-					
ı.		(e) Transfer o	f gift		
	Transferee's name, address, a	nd 7IP + 4	Rei	lationship of trans	feror to transferee
_					
_					
(a) No.					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descrip	otion of how gift is held
1 0,11					
_					
-					
\vdash					
		(e) Transfer o	of gift		
	Transferee's name, address, ar	nd ZIP + 4	Re	lationship of trans	feror to transferee
_					
_		-			
		<u></u>			

FORM 990-PF	GAIN OR	(LOSS) FRO	M SALE	OF ASSE	TS	STATEMEN	T 1
(A) DESCRIPTION OF PR	ROPERTY			MANN ACQUI		ATE JIRED DATE	SOLD
PUBLICLY TRADED S	SECURITY			DONAT	ED		
(B) GROSS SALES PR	S VAL	C) UE AT F OF ACQ.	(D) EXPENSE SALE		(E) EPREC.	(F)	oss
128	3,549.	136,120.		0.	0.	<7	,571.:
CAPITAL GAINS DIV	/IDENDS FROM	PART IV					0.
TOTAL TO FORM 990)-PF, PART I,	LINE 6A				<7	,571.:
							
FORM 990-PF	DIVIDEND	S AND INTER	REST FR	OM SECUR	ITIES	STATEMEN	Т 2
SOURCE	GROSS AMOUNT	CAPITAI GAINS DIVIDENI	R	(A) EVENUE R BOOKS	(B) NET INVE MENT INC) STED NCOME
LINCOLN FINANCIAL	1,765	•	0.	1,765.	1,7	765.	
TO PART I, LINE 4	1,765	•	0.	1,765.	1,7	765.	
FORM 990-PF		LEGAI	FEES			STATEMEN	Т 3
DESCRIPTION		(A) EXPENSES PER BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTE NET INCO) TABLE OSES
LEGAL FEES-ORGAN	- ZATIONAL	5,000.		0.			0.
TO FM 990-PF, PG	1, LN 16A	5,000.		0.			0.

FORM 990-PF	OTHER EX	KPENSES			STATEMENT	4
	(A) XPENSES ER BOOKS	(B) NET INVE: MENT INC		(C) ADJUSTED NET INCOM		
INVESTMENT ADVISORY FEES AMORTIZATION	100. 224.	:	100.			0.
TO FORM 990-PF, PG 1, LN 23	324.		100.			0.
FORM 990-PF	CORPORATI	E STOCK			STATEMENT	 5
DESCRIPTION		_	воок	VALUE	FAIR MARKE	r
1,936 SHS PFIZER INC		_		65,740.	62,8	76.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	=		65,740.	62,8	76.
FORM 990-PF DEPRECIATION OF A	SSETS NOT	HELD FOR	INVES	TMENT	STATEMENT	6
DESCRIPTION		r or Basis		ULATED CIATION	BOOK VALU	E
OTHER		5,049.		224.	4,8	25.
TOTAL TO FM 990-PF, PART II, LN	14	5,049.		224.	4,8	25.

FORM	990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	7
NAME	OF CONTRIBUTOR	ADDRESS		
JOHN	F KELLY	300 FLINTLOCK ROAD SOUTHPORT, CT 06890		
FORM	990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS	STATEMENT	8

NAME OF MANAGER

JOHN F KELLY ELIZABETH L KELLY

2016 DEPRECIATION AND AMORTIZATION REPORT

Cipion C	0-PF	FORM 990-PF PAGE 1						990-PF							•
3BAM 5,049. 5,049. 5,049. 5,049. 180M HY42 5,049. 5,049. 5,049. 5,049. 5,049.		Description	Date Acquired		Lıfe				Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
3BAM 5,049. 5,049. 5,049. 5,049. 180M HY42 5,049. 5,049. 1.049. 1	PROGRAM	SERVICES													
5,049. 5,049. 5,049.	ORGANIZAT	IONAL EXPENSES	05/12/16	248	180M	HY42	5,049.				5,049.			224.	224.
5,049.	* 990-PF E	G 1 TOTAL PROGRAM					5,049.				5,049.	.0		224.	224.
5,049.	* GRAND TO	TAL 990-PF PG 1					•				•				
	DEPR & AMORT	RT					5,049.			!	5,049.	.0		224.	224.
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							popular sport (a)	, , ,							•